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30593 7590 08/17/2010					Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR		ATTORN	NEY DOCKET NO.	CONFIRMA	TION NO.	
10/593,075 06/28/2007 Mats Janstai FITLE OF INVENTION: PAPER MACHINE COMPRISING A TRANSLATION DEVICE					9077-00008/US 6480 11/16/2010 AWONDAF2 00000012 10593075 01 FC:2501 755.00 OP					
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	Æ	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATI	E DUE	
nonprovisional	YES	\$755	\$300		\$0		\$1055	11/17	7/2010	
EXAM	INER	ART UNIT	CLASS-SUBCLASS							
HUG, ERIC J 1791			162-263000							
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  2. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.										
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government  4a. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 08-0750 (enclose an extra copy of this form).										
a. Applicant claim	tus (from status indicated s SMALL ENTITY state	See 87 CFR 1.27.	☐ b. Applicant is no							
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.										